

APPLICATION TO
**TRANSFER ARIZONA RECIPROCAL TEACHING, RECIPROCAL SUPERVISOR,
RECIPROCAL PRINCIPAL, RECIPROCAL SUPERINTENDENT CERTIFICATE**
ARIZONA DEPARTMENT OF EDUCATION-CERTIFICATION UNIT



This form is for applicants who currently hold an Arizona Reciprocal Teaching or Administrative certificate.

Mailing Address: P.O. Box 6490, Phoenix, AZ 85005-6490 Telephone: (602) 542-4367

GENERAL INSTRUCTIONS AND INFORMATION: Please submit the following:

- A. A photocopy of your valid Arizona Department of Public Safety Identity Verified Prints (**IVP**) fingerprint card (plastic).
- B. A completed application and the appropriate fee in a money order, cashier's check or personal check **ONLY** for each certificate to be transferred, made payable to the Arizona Department of Education (ADE). Fees are not refundable. **Cash will not be accepted.**
- C. **For teaching certificates submit:** (1) Verification of a passing score on the required AEPA or NES exams OR comparable exam(s) from another state (notarized copy of the score report required). Out-of-state exam score report submitted must indicate "Pass" on it. If verification of the exams has been previously submitted and approved, it is not necessary to submit them again.
- D. **For administrative certificates submit:** (1) Verification of a passing score on the appropriate AEPA exam or comparable exam from another state (notarized copy of the score report required). The score report submitted must indicate "Pass" on it. (2) Official transcripts documenting a school law and school finance course. If verification of the exam or courses has been previously submitted and approved, it is not necessary to submit them again.
- E. Verification of state approved Structured English Immersion (SEI) training. Note: If you have held the Provisional SEI endorsement for 3 or more years you must apply for the Full SEI endorsement. Please submit either official transcripts or certificate of completion of State Board approved SEI training. Individuals who hold an Arizona Full Bilingual or Full ESL endorsement are exempt from the SEI endorsement requirement. If verification for the Full SEI has been previously submitted, it is not necessary to submit again.

Are you applying for a Provisional SEI or Full SEI endorsement? ☐ YES ☐ NO

If YES, please check one of the following:

☐ Provisional SEI Endorsement\$60 ☐ Full SEI Endorsement\$60

SECTION 1: PERSONAL INFORMATION: (TYPE OR PRINT IN BLUE OR BLACK INK)

Social Security Number: _____ - _____ - _____ Date of Birth: ____/____/____ Gender: M / F
(For identification purposes only)

Full Legal Name: _____
Last First Middle

Mailing Address: _____
Street Number or P.O. Box City State Zip

Telephone: (____) _____ - _____ Email Address: _____
(Home) (Home)

Ethnicity: ☐ Asian or Pacific Islander ☐ Black or African-American (Not-Hispanic) ☐ Hispanic or Latino
☐ White (Not-Hispanic) ☐ American Indian or Alaskan Native ☐ Other
(Gender and Ethnicity are requested for federal reporting purposes only)

SECTION 2: CERTIFICATION TYPE AND FEES

I would like to transfer my Reciprocal Certificate(s): (\$60 each)

☐ ARTS EDUCATION ☐ EARLY CHILDHOOD ☐ ELEMENTARY ☐ SECONDARY - APPROVED AREA _____
☐ SPEC ED EARLY CHILDHOOD ☐ SPEC ED EMOTIONAL DISABILITY ☐ SPEC ED CROSS CATEGORICAL
☐ SPEC ED HEARING IMPAIRED ☐ SPEC ED LEARNING DISABILITY ☐ SPEC ED INTELLECTUAL DISABILITY
☐ SPEC ED ORTHOPEDIC/HEALTH IMPAIRMENT ☐ SPEC ED SEVERELY AND PROFOUNDLY DISABLED ☐ SPEC ED VISUALLY IMPAIRED
☐ PRINCIPAL ☐ SUPERINTENDENT ☐ SUPERVISOR

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SECTION 3: CRIMINAL HISTORY - ANSWER EVERY QUESTION, SIGN AND DATE

ATTENTION: If "YES" is indicated for any of the following questions, please attach a full explanation to this application, a statement must be provided with each application.

1. **YES__ NO__** Have you ever had any professional certificate or license, revoked or suspended?
2. **YES__ NO__** Have you ever received a reprimand or other disciplinary action involving any professional certification or license?
3. **YES__ NO__** Have you ever been convicted of any felony offense?
4. **YES__ NO__** **Have you ever been arrested for any offense for which you were fingerprinted?**
5. **Have you ever been arrested for any of the following offenses in this state or similar offenses in another jurisdiction?**

<p>YES__ NO__ a Second-degree murder</p> <p>YES__ NO__ b Aggravated assault resulting in serious physical injury or involving the discharge, use or threatening exhibition of a deadly weapon or dangerous instrument against a minor under fifteen years of age</p> <p>YES__ NO__ c Sexual assault</p> <p>YES__ NO__ d Molestation of a child</p> <p>YES__ NO__ e Sexual conduct with a minor</p> <p>YES__ NO__ f Commercial sexual exploitation of a minor</p> <p>YES__ NO__ g Sexual exploitation of a minor</p> <p>YES__ NO__ h Child abuse</p> <p>YES__ NO__ i Kidnapping</p> <p>YES__ NO__ j Sexual abuse of a minor</p> <p>YES__ NO__ k Taking a child for the purpose of prostitution as prescribed in section 13-3206</p> <p>YES__ NO__ l Child prostitution as prescribed in section 13-3212</p> <p>YES__ NO__ m Involving or using minors in drug offenses</p>	<p>YES__ NO__ n Continuous sexual abuse of a child</p> <p>YES__ NO__ o Attempted first-degree murder</p> <p>YES__ NO__ p Any other dangerous crime against children as defined in section 13-604.01</p> <p>YES__ NO__ q Any of the above listed offenses if committed as a reparatory offense as described in section 13-1001</p> <p>YES__ NO__ r Any offense causing you to register as a sex offender</p> <p>YES__ NO__ s First-degree murder</p> <p>YES__ NO__ t Armed Robbery</p> <p>YES__ NO__ u Incest</p> <p>YES__ NO__ v Exploitation of minors involving drug offenses</p> <p>YES__ NO__ w Sexual abuse of a vulnerable adult</p> <p>YES__ NO__ x Sexual exploitation of a vulnerable adult</p> <p>YES__ NO__ y Commercial sexual exploitation of a vulnerable adult</p> <p>YES__ NO__ z Abuse of a vulnerable adult</p> <p>YES__ NO__ aa Molestation of a vulnerable adult</p> <p>YES__ NO__ bb Neglect of a vulnerable adult</p>
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I UNDERSTAND THAT PURSUANT TO ARS § 15-534, ANY PERSON WHO MAKES A FALSE STATEMENT, REPRESENTATION OR CERTIFICATION IN ANY APPLICATION FOR CERTIFICATION IS GUILTY OF A MISDEMEANOR OFFENSE. I SWEAR OR AFFIRM THAT THE FOREGOING INFORMATION COMPLETED BY ME, OR SUBMITTED BY ME FOR CERTIFICATION PURPOSES IS, TO THE BEST OF MY KNOWLEDGE, TRUE AND CORRECT. FURTHERMORE, SHOULD ANY PART OR ALL OF THE INFORMATION HEREIN PROVIDED PROVE TO BE FALSE, I RECOGNIZE THAT IT SHALL BE JUST CAUSE FOR REVOCATION, SUSPENSION, OR OTHER DISCIPLINARY ACTION AGAINST ANY CERTIFICATE ISSUED TO ME BY THE ARIZONA DEPARTMENT OF EDUCATION.

Applicant's Signature

Date